

| POSITION | INITIALS | ID NO. | DATE |
|---------------------------|-----------|--------------|----------------|
| FEE DETERMINATION | <i>CH</i> | <i>11622</i> | <i>4/17/00</i> |
| O.I.P.E. CLASSIFIER | <i>CH</i> | | <i>4/17/00</i> |
| FORMALITY REVIEW | | <i>11622</i> | <i>5/28/00</i> |
| RESPONSE FORMALITY REVIEW | | <i>11622</i> | <i>5/8/00</i> |

INDEX OF CLAIMS

✓ Rejected
 = Allowed
 — (Through numeral) ... Canceled
 + Restricted

N Non-elected
 I Interference
 A Appeal
 O Objected

| Claim | Date |
|----------|------------|
| Final | |
| Original | |
| 1 | <i>5/8</i> |
| 2 | <i>5/8</i> |
| 3 | <i>5/8</i> |
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| Claim | Date |
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If more than 150 claims or 10 actions
staple additional sheet here

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